

Administrator

Important news and updates from your benefits professionals

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Trends In Today's World

GLP-1 Drug Use Growing

KFF Health Tracking reveals that more than 10% of U.S. adults have tried Ozempic, Wegovy or other obesity drugs. While two-thirds are using the drugs to manage diabetes or heart disease, 4 out of 10 are trying to lose weight. Most are between 50 and 64 years of age. Only a small percentage take the drugs solely for weight loss due to cost and limited insurance coverage.

Healthcare High School in Alabama

Fulfilling a goal set forth by Alabama Gov. Kay Ivey, the state legislature recently approved state funding for a healthcare high school scheduled to open in 2026. Representatives of a regional hospital, the Alabama Hospital Association and renowned state universities will join healthcare executives on a governor-appointed board to oversee the school, intended to address a growing need for doctors, nurses and medical technicians throughout the state.

Centenarians to Triple

According to a Pew Research analysis of U.S. Census Bureau data, an estimated 422,000 Americans will reach or surpass

AI: Powering Year-Round Engagement

When it comes to employee engagement, most employers are quick to agree that plan members only care about their health benefit plan when they need to enroll or when they get sick. After a decades-long search for ways to help employees use their health plan to better navigate a complicated healthcare system, Artificial Intelligence (AI) may have the power to finally move the employee engagement needle.

Benefits Technology Must Catch Up

There is no question that a growing percentage of our population, regardless of age, are using AI when they send text messages, respond to emails or participate in live chat sessions. The reality is that as people become more comfortable using these decision support tools, the more they will expect to find this level of convenience and personalization when accessing their health benefits.

Overcoming Obstacles

Unfortunately, the mention of a doctor's visit or health insurance will strike fear and confusion into the minds of far too many working adults. So much fear and confusion, in fact, that more than 80% of employees describe themselves as being confused about their benefits and many acknowledge putting off needed care due to cost or the difficulties associated with finding a healthcare provider.

Experience shows that employees will search online for health-related information, including potential



treatment costs. Today, AI applications can respond to online behavior by delivering personalized communication and reminders that encourage members to use their benefits to find solutions. Personalized emails, texts or interactive prompts within live chats can invite members to contact a customer service person for further assistance.

Keeping Benefits Front and Center

To keep benefits top of mind with employees, some are creating AI tools to build personalized well-being profiles that can help patients better understand treatment options or better manage their medications. More general applications can inform members of health and wellness events, screenings and other personalized offerings available within their health benefit plan. As AI continues to evolve, adding personal involvement will have a dramatic impact on benefits engagement, not just during enrollment but all year long.



Assaults on ERISA Preemption Keep Coming



Upheld for decades by federal courts, ERISA preempts state and local laws that conflict with ERISA's ability to maintain national standards that govern self-funded, multistate employer sponsored health benefit plans. In recent years, however, an increasing number of state and local laws have tried to weaken ERISA's protection with cumbersome administrative and reporting requirements as well as state-required benefit mandates.

A few recent state-sponsored actions include...

- Regulatory updates to mental health parity requirements put forth by the Biden administration. The rules, issued jointly by the departments of HHS, Labor and Treasury, include review of provider networks and added restrictions on prior authorization for

behavioral healthcare. The ERISA Industry Committee (ERIC) continues to argue that the proposed restrictions will damage access to behavioral health treatment rather than increasing it.

- Kentucky Senate Bill 188, created to help preserve patient pharmacy choice, is also being opposed by ERISA supporters who say it will control network practices and plan options available to self-insured employers and PBMs that may manage these plans. Opponents argue that the legislation is not only in direct conflict with federal law governing self-insured health plans but will result in higher plan and prescription drug costs throughout Kentucky.
- Efforts to regulate employer sponsored prescription benefit plans are ongoing in a number of states, including Florida which passed its Prescription Drug Reform Act last year regulating PBMs and pharmaceutical manufacturers operating in Florida. Even though the law is being implemented, efforts to carve out self-insured employer sponsored plans continue.

While threats to ERISA preemption continue, TPAs, brokers and employer groups pledge to work together in support of the federal law that has made it possible for employers to design, administer and maintain high-quality, self-insured health benefit plans for the past 50 years.

Trends continued

the age of 100 by 2054. This is more than four times the 101,000 centenarians who make up 0.03% of the U.S. population today. In order to make their retirement savings last longer, advisors expect 25% of men and 17% of women 65 and older to be in the workforce by 2032.

Move Over Management

While Gen Z employees (those born between 1997 and 2012) currently only hold about 1 in 10 managerial

roles, ADP Research Institute estimates that they are being promoted into management 1.2 times faster than just 4 years ago. While only 2% of U.S. workers were reporting to Gen Z managers as of December of 2023, people under age 27 comprise 17% of our total workforce.

More Leaves for Mental Health

A provider specializing in absence management services reports that

mental health related leaves of absence rose by a third in 2023. And while this trend may be influenced by the Covid-19 pandemic, their study shows that mental health leaves have tripled since 2017. Last year, 70% of mental health leaves were taken by women. 33% of these days off were taken by millennial women, followed closely by Gen X women who accounted for some 30% of these leaves.

Are You Prepared for a Cybersecurity Threat?

HHS describes healthcare organizations as "one-stop shops" for identity, financial and health-related information. While a growing dependence on digital tools increases their risk of cyberattacks, there are steps every organization can take to strengthen their cybersecurity defenses.

- Even small organizations can be targets, making measures like multi-factor authentication and publicly inaccessible cloud storage systems very important.
- Conducting regular security assessments can be used to uncover gaps and shortcomings. Data audits can identify redundant or unnecessary data that may pose an increased risk.
- Security incidents and breaches can be avoided by storing sensitive patient records with greater security protocols such as encryption.
- Contingency plans should be developed that can enable operations, claims administration and external communication to continue in the event of a security incident.

The cost of implementing meaningful security protocols is minimal compared to that of dealing with a breach, which averaged more than \$4 million last year. While building a strong defense against cybercrime is no easy undertaking, awareness of the risks and the need for proactive measures cannot be overstated.

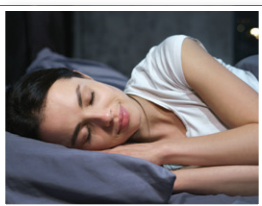
Urgent Care Clinics and Mental Health

The Psychiatric Services journal reported that more than 20 mental health urgent care centers have opened in just the past year, adding to the 70+ such centers in existence a few years ago. The centers can provide therapy, prescribe medications or refer patients to a higher level of care when needed.

Physicians say these urgent care facilities, some of which are owned by hospitals, are relieving a good deal of pressure from overburdened emergency departments and psychologists that have long been the only resources for families in need of help. One- to two-hour visits often cost a few hundred dollars and while not typically covered by insurance, Medicaid is often accepted. Considering the surge in demand for mental health treatment since the pandemic, the potential for such centers would seem to be unlimited.

Sleep – a Natural Anxiety Eliminator

When you're stressed and worried, it can be difficult to sleep and, of course, missing sleep can boost anxiety, creating a sort of perfect storm. A series of sleep studies have found that deep sleep can help settle and reset anxiety by causing brain rhythms to synchronize and both heart rate and blood pressure to drop.



Sleep experts remind us that getting some exercise, watching your intake of caffeine and alcohol and maintaining a calming bedtime routine can help everyone, especially those dealing with anxiety. Avoiding

television and computer screens is important and taking a few minutes to journal or share your concerns with a partner can help set the stage for a calmer tomorrow.



Employers Can Fight Obesity

A recent podcast sponsored by the International Foundation of Employee Benefit Plans focused on obesity and many of the implications surrounding the use of GLP-1 drugs. With more than 40% of adults in the U.S. classified as being obese, it's a topic of importance to employers and employees alike.

Research scientists participating in the podcast noted that even modest weight loss can result in improved blood pressure, cholesterol levels and joint mobility. Another interesting fact was that while the cost of GLP-1 drugs is high, rebates can lower the cost by half. When compared to the costs associated with treatment of heart failure and other chronic conditions, the cost/benefit analysis takes on added meaning.

Easy Ways to Make a Difference

For employers unable to afford coverage of weight-loss drugs, there are many other ways to encourage employee well-being. For example...

- *Nutritional counseling services can be provided as well as healthy food offerings in cafeterias or vending machines.*
- *Wellness programs can include smoking cessation programs and other behavioral therapies.*
- *Even getting office workers up to move for a few minutes every hour can help lower the risk of heart disease.*

Regardless of the steps you may take to encourage healthy behavior, staying positive and consistent with company values will enhance employee retention and recruitment alike.

Promoting Prevention

In an effort to identify health risks early, many employers are taking a closer look at ways to help employees obtain preventative screenings and annual wellness exams. With experience showing that money invested in primary care results in long-term savings, measures such as mammograms, colonoscopies, dental checkups and screenings for chronic conditions like high blood pressure and diabetes can be valuable components of worksite wellness programs.

Examining claims data will likely show that encouraging annual physicals, regular physician visits and targeted screenings will not only help reduce the occurrence of chronic conditions, but can spark lifestyle changes that have a positive impact on company culture as well.

Did You Know? New Ideas for Healthy Consumers

Where to Go for Care

Because Emergency Departments usually treat patients according to the severity of their medical condition, ER physicians recommend going to the ER when someone is experiencing chest pain, difficulty breathing, broken bones or other serious conditions.



If your primary physician is not able to take you as a walk-in, Immediate Care facilities are best for cuts and scrapes, rashes, sprains and minor burns and Virtual Visits are typically advised for cold or flu symptoms, allergies and sore throats. Knowing where to go when you're sick or injured is important, not only because of the time involved in receiving treatment but in the cost and quality of your experience as well.

Why Blood Pressure Readings Fluctuate

A nurse practitioner at midwest-based Aurora Health Care cautions that physical activity, emotions, diet and recent sleep quality can cause blood pressure readings to vary, even within minutes.

- *Normal blood pressure is less than 120/80, with 120 indicating systolic pressure and 80 being diastolic.*
- *Blood pressure starts rising a few hours before we wake up, peaks at mid-day and drops in the afternoon and evening.*

- *Even though home blood pressure cuffs can be inaccurate, a systolic difference of more than 20 points could signal a potential problem and should be discussed with a physician.*

If left undetected, prolonged high blood pressure can lead to stroke, heart attack, heart failure, kidney disease, peripheral arterial disease and more. And because many people don't have symptoms, hypertension or high blood pressure is often referred to as the silent killer.

Testing for Parkinson's



A new skin biopsy test that can detect an abnormal protein found in the nerves of people with Parkinson's is an important part of the progress researchers are making against the disease. The skin test is seen as a

window to the brain that may enable neurologists to diagnose Parkinson's long before symptoms appear.

According to a study published in the JAMA, researchers say the test has accurately detected the abnormal alpha-synuclein protein in 93% of people who had already been diagnosed with Parkinson's. Other tests are finding the protein in spinal fluid and researchers are working to determine if it can be discovered using blood, nasal swabs and tears. The goal is to detect the protein years before symptoms appear and develop disease-modifying therapies to slow or stop the disease altogether.

Note: This newsletter is not intended as a substitute for personal medical or employee benefits advice. Please consult your physician before making decisions that may impact your personal health. Talk to your benefits administrator before implementing strategies that may impact your organization's employee benefit objectives.



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